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PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001  Application or Docket Number  100688												84 	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALI TYPE	LEN	TITY	OR	OTHER		
TOTAL CLAIMS			9				RAT	E	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		· 0		X\$ 9	X\$ 9=		OR	X\$18=	1	
INDEPENDENT CLAIMS			/ minus 3 =		. 6		X42=			OR	X84=		
ML	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+140=			OR	+280=	-	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	740		
CLAIMS AS AMENDED - PART II								,-		Jon	OTHER		
(Column 1) (Column 2) (Column 3)								LLE	ENTITY	OR	SMALL		
<b>AMENDMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***	r O: 1:14	=	X42	-		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=		OR	+280=		
							TO ADDIT. F	TAL		OR	TOTAL ADDIT. FEE		
_		(Column 1)		(Colur		(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
AMENDMENT B	i Liver of the state of the second	CLAIMS REMAINING AFTER AMENDMENT	Antistation and the Sec	HIGH NUM PREVK PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 12	Minus	** 2	<u>v</u>	=	X\$ 9	=		OR	X\$18=	_/	
	Independent FIRST PRESE	NTATION OF MI	Minus  JLTIPLE DEF	*** ENDENT	2 CLAIM	=	X42:	=		OR	X824	86	
	<del> </del>					<u>!</u>	+140	=		OR	+280=		
							TO ADDIT. F			OR	i O i AL ADDIT. FEE	1600	
_		(Column 1)		(Colur		(Column 3)						Í	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.12	Minus	-2	U	=	X\$ 9	_		OR	X\$18= .		
	Independent + 3 Minus +++		3	-	X42=			OR	X84=	<u> </u>			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_			+280=	, _	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+28U=		
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 8/01)

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